

Inpatient Rehabilitation Facility (IRF) Preliminary Review Report Guidance

The IRF Preliminary Review Report provides facilities with an opportunity to review their data in a facility-specific report, provides facilities a chance to become familiar with content of the review report and informs facilities of how their reports will be distributed.

The Report does not indicate whether your facility will be eligible for the Annual Payment Update nor is it a review of data that will be posted in accordance with Section 3004 of the Affordable Care Act.

Provider Review Reports will be accessible beginning March 21, 2014. **Providers have thirty (30) days** during which to contact HCIS with questions regarding Review Reports (April 20, 2014).

Sample IRF Provider Review Report

IRF Provider Preliminary Review Report

Review of Quality Measure data for time period 01/01/2013 to 09/30/2013

State: XX

Provider Name: Test Provider

CCN: XXXXXX

Street Address: XYZ

City: ABC

ZIP Code: ZZZZZ

Phone: 111 222 3333

Quality Measures	NQF Measure Number	Numerator/ Reported Infections	Denominator/ Device Days	Reported %	National Average	Expected Rate
Percent of Patients with Pressure Ulcers That Are New or Worsened (Short Stay)	0678	.	.	**	*	N/A
Catheter Associated Urinary Tract Infection (CAUTI)	0138	1	519	N/A	*	*

Notes:

-- Period (.) indicates data in the Numerator or Denominator field is missing or has been excluded.

-- Double asterisk (**) in the reported percent (%) column indicates that the data could not be computed because of missing or excluded information.

-- Asterisk (*) indicates pending data.

-- Expected Rate pertains to the CAUTI measure only.

-- N/A indicates that the value is not applicable.

-- The Quality Measure data is not Risk Adjusted for Percent of Patients with Pressure Ulcers that are New or Worsened.

-- To review your submitted HAI rates, visit the CDC NHSN website: <http://www.cdc.gov/nhsn/inpatient-rehab/index.html>

Explanation of Review Report Fields:

An explanation of the information contained within the Review Report is provided below:

Item	Description
NQF Measure Number	The National Quality Forum (NQF) identification number associated with the Quality Measure.
Pressure Ulcer Measure Calculation	<p>Numerator: The number of patients for whom the discharge assessment indicates one or more new or worsened Stage 2-4 pressure ulcers:</p> <p>Denominator: The number of patients with a qualifying assessment with target dates between 1/01/2013 and 9/30/2013 inclusive.</p> <p>Reported Percent (%): Reported percent (%) is equal to the numerator divided by the denominator multiplied by one hundred (100). This percentage is not risk adjusted.</p>
CAUTI Measure Calculation	<p>Reported Infections: the observed number of infections reported for quality reporting as the numerator.</p> <p>Device Days: The number of urinary catheter days reported for quality reporting.</p> <p>Reported Percent (%): Displays on the report as N/A (not applicable), as CAUTI data is a rate, not a percentage.</p> <p>This data is reported for the time period 1/01/2013 to 9/30/2013.</p>
National Average	The National Average is derived by summing the numerators for all cases in the nation divided by the sum of the denominators in the nation.
Expected Rate	The number of expected infections, in the context of statistical prediction, is calculated using rates from a standard population during a baseline time period. These rates will be provided in future reports.

Frequently Asked Questions (FAQs)

When and how will I get my report?

Provider Review Reports will be accessible for **thirty (30) days** beginning March 21, 2014 until April 20, 2014. Review Reports must be accessed using the **CASPER REPORTING APPLICATION**. Additional information about accessing your report is below Under Accessing Reports.

How do I ask questions about my report(s)?

Please contact the Quality Reporting Review Report Help Desk at help@hcareis.com for additional information and/or assistance as needed.

Where can I get additional information?

Updated IRF-PAI Training Manual: <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/InpatientRehabFacPPS/Downloads/IRFPAI-manual-2012.pdf>

Quality Reporting requirements: <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Program-Measures-Information-.html>

CDC's NHSN Website: <http://www.cdc.gov/nhsn/inpatient-rehab/index.html>

Accessing the Preliminary Review Reports:

Review Reports must be accessed using the **CASPER REPORTING APPLICATION**. Providers access the CASPER Reporting Application from their **CMS IRF-PAI System Welcome** page by selecting the **CASPER Reporting link**.

Login

Selecting the CASPER Reporting link from the above website connects you to the **QIES National System Login** page for CASPER Reporting.

Enter your login information in the appropriate fields and select the **Login** button. The **CASPER Topics** (Home) page then displays.

The Quality Reporting Review Report for individual providers is located in a separate folder within the System-Generated Final Validation Reports section.

For more about the CASPER reporting system, refer to the following link:

<https://www.gtso.com/irfpaitrain.html>. This link will take you to the IRF-PAI User Guides and Training page. Directions about accessing the CASPER reporting system using the QIES ASAP System begins in Section 3, Functionality.